

09/463033

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINA			
O.I.P.E. CLASSIFIED			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected W Non-elected
 " Allowed I interference
 (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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